

**An Examination of the Effectiveness of Acupuncture
as an Adjunct to an Alcohol and Other Drugs (AOD)
Treatment Program:**

A Pilot Study

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Certificate of Authorship/Originality

I certify that the work in this thesis has not previously been submitted for a degree nor has it been submitted as part of requirements for a degree except as fully acknowledged within the text.

I also certify that the thesis has been written by me. Any help that I have received in my research work and the preparation of the thesis itself has been acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.



Katherine Berry

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Abstract

Background to the study:

Alcohol and other drugs are one of the leading causes of preventable deaths and hospital admissions in Australia. Treatment services are expected to meet the growing needs of the community in the delivery of appropriate and timely interventions for patients and their families. Despite this, these services are inadequately funded and have significant staff shortages. There is an urgent need to explore adjunct treatments to complement public health care services. Research emerging from the United States and United Kingdom suggests acupuncture is effective in treating alcohol and other drug dependencies. In 2004, the University of Technology, Sydney (UTS) conducted Australia's first hospital based study examining the effectiveness of acupuncture as an adjunct to an alcohol and other drugs treatment program.

Objectives:

The aim of the study was to determine the feasibility of acupuncture as an adjunct treatment in an existing AOD program.

Study Design:

The study was an uncontrolled, open label pilot study.

Subjects:

Forty seven subjects (29 male and 18 female) volunteered to receive acupuncture treatments during their admission to Palm Court Residential Rehabilitation Unit, Rozelle Hospital.

Method and interventions:

Acupuncture treatments were delivered weekly between May 21 and October 8 2004. Subjects received up to four, one hour acupuncture sessions, during their four week admission. Pre and post treatment anxiety scores were measured for each session, to determine immediate changes in anxiety. Variables for analysis included gender ratio, drug of choice, mean age, acupuncture points selected, initial treatment date, principal student practitioner and total number of treatments received. Subjects' perceptions of the effectiveness of acupuncture were recorded in a client satisfaction questionnaire. The average length of stay (number of days in treatment) for the trial subjects was retrospectively compared to the average length of stay for the same period, in the previous two years.

Results:

The subjects fell into four categories determined by whether they: could not complete the program (because of time constraints); dropped out of Palm Court; elected to drop out of the acupuncture program; or completed both programs. Thirteen of the 47 subjects (5 male, 8 female) completed the trial, receiving four treatments in total.

With all four groups, there were statistically significant decreases in mean anxiety scores for the initial treatment ($p < 0.05$). This was the only treatment for which between group comparisons could be made because of subject drop out.

Alcohol, accounting for 60% of the sample group, was the only drug with adequate representation to consider for analysis. No obvious patterns were found to suggest alcohol was a predicting factor for program completion.

Analysis was conducted to determine if age or gender were predicting factors for program completion. The mean age was similar for all four groups, therefore age was not a predicting factor for program completion. However, it was found that while men comprised the majority of subjects, women were statistically significantly more likely to complete it ($p = 0.03$).

The average length of stay (number of days) in Palm Court was higher for the trial period than for the same time in previous years. However data were limited and it is difficult to draw conclusions from such a small sample size and short trial duration (21 weeks).

Limitations of the study included a high drop out rate; small sample sizes; difficulties distinguishing between acupuncture and health improvements over time; difficulties disentangling the effects of acupuncture from non treatment specific health outcomes (placebo); sample and practitioner bias; no treatment prescription leading to a wide range of points selected and no post treatment follow up.

Discussion:

Uncontrolled clinical trials are essential in new frontiers of research to determine whether the clinical effects are worth investigating. Decreases in mean anxiety scores for all the groups, increase in program retention rates and positive feedback from client satisfaction surveys suggest that further research is warranted.

Conclusions:

Despite the limitations of this uncontrolled open label pilot study, it has been a necessary first step. The study *An Examination of the Effectiveness of Acupuncture as an Adjunct to an Alcohol and Other Drugs Treatment Program* has provided a foundation on which to build an evidence base in the future.

Supporting Conference Presentations

Australasian Acupuncture and Chinese Medicine Annual Conference, Melbourne May 2005

Meeting of the Minds Langton Centre, Sydney February 2005

World Federation of Acupuncture and Chinese Medicine Society, Gold Coast November 2004

Royal North Shore Hospital Annual Scientific Research Meeting, Sydney November 2004

University of Technology, Sydney Postgraduate Research Conference, Sydney August 2004

International Harm Reduction Conference, Melbourne April 2004

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